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Bib Data Sheet

CONFIRMATION NO. 8235

<b>SERIAL NUMBER</b> 10/073,346	<b>FILING DATE</b> 02/13/2002 <b>RULE</b>	<b>CLASS</b> <del>438</del> 422	<b>GROUP ART UNIT</b> <del>1744</del> 1743	<b>ATTORNEY DOCKET NO.</b> 2599-104-C2
<b>APPLICANTS</b> Kelly G. Ammann, Longmont, CO; Robert E. Schneider, Erie, CO; Robert J. Smith, Louisville, CO;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CON OF 09/985,064 11/01/2001 WHICH IS A CON OF 09/303,030 04/30/1999 PAT 6,335,166 WHICH CLAIMS BENEFIT OF 60/083,927 05/01/1998				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/17/2002</b>				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	<b>STATE OR COUNTRY</b> CO	<b>SHEETS DRAWING</b> 46	<b>TOTAL CLAIMS</b> 30/26 <b>INDEPENDENT CLAIMS</b> 21
<b>ADDRESS</b> 21365				
<b>TITLE</b> Incubator for use in an automated diagnostic analyzer				
<b>FILING FEE RECEIVED</b> 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	